

# YLLSoM – Preparing for the Future

By Wilnard Tan and Andrew Arjun Sayampanathan

Photo: Yong Loo Lin School of Medicine

**SINGAPORE TRAINS** one of the least number of doctors per 100,000 population in the world compared to other developed countries. Two challenges – one of demand (ageing population) and the other of supply (few doctors) – prompted the rapid increase in the number of spaces in medical schools in recent times. The National University of Singapore (NUS) Yong Loo Lin School of Medicine (YLLSoM) has steadily raised its intake from 260 to 300 over six years, while the Nanyang Technological University Lee Kong Chian School of Medicine (LKCMedicine) will increase numbers gradually from the current 50 to 150. Duke-NUS Graduate Medical School additionally provides about 50 students every year. In consequence, approximately 400 locally-trained doctors will be added into the workforce annually. However, do we have the resources to meet the needs of these students? Or are we sacrificing quality for quantity?

To address this, we present some important components of quality medical education for consideration:

- Hands-on learning: students should be given opportunities to amass experience through exposure to actual practice so that they can confidently handle problems after graduation.
- Student-centred learning: students should have time to learn and resources to explore their own interests, and should also take charge of their own learning.
- Apprenticeship learning: students should be aware that knowledge and values work hand in hand to make good clinicians, and these are best gained by emulating their mentors.

With more medical students in the wards, it is arguable that the quality of education will suffer. The most obvious of which is hands-on learning. Will there be enough training facilities and exposure – especially for the paediatric rotation – for students, given that the increase (if at all) is marginal compared to the rate of increase of medical students? Apprenticeship learning can also be compromised as clinicians become overly taxed with heavier teaching

duties with more students. This in turn can compromise student-centred learning, as students may not seek help from mentors for fear of further burdening them.

However, it is heartening that the three local medical schools are increasing their emphasis on these areas. To improve training despite the constraints, innovation is essential. For example, schools are already tapping on medical technology to augment the relative lack of resources. LKCMedicine

introduced the virtual dissection table to overcome the relative lack of cadavers in Singapore. E-lectures are also becoming increasingly common, allowing tutors to focus on developing higher order skills like critical thinking while leaving the teaching of facts to the computer. These are just some of the numerous technologies out there that can allow students to learn at their own pace.

Another aspect to consider is the outcomes of education. In Medicine, new information is being churned out at a breakneck pace. With so much information that students need to acquaint themselves with in five years, it is tempting to merely cram it all in. Cramming can cause – and has caused – students to detest the learning process. Perhaps the focus of medical school should be to equip students with the right attitude and skills to acquire knowledge rather than emphasise the actual knowledge they are taught.

We are bound to see more changes in policies, from the number of medical school places to the postgraduate scene, but one thing that will remain constant is the goal of medical school: establishing the crucial foundations for the doctors of tomorrow. The danger is to be caught in the hurricanes of change and be uprooted from this primary purpose. With honest reflection and innovation, the doctors of tomorrow can build on and improve on the work of those who have come before us. ■

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*Wilnard (inset, left) and Andrew are both third year medical students and currently serve as the President and Vice-President of the 65th NUS Medical Society Executive Committee. Wilnard believes that life is too short to be wasted, and service to others is one good way to live it well. Andrew believes that people need to spend more time appreciating the finer things in life.*

